



## 2025 ~ Make-up Artist Application

Please include a copy of your resume if you have one.

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

1. Were you self-taught or did you attend a special FX make-up school? If you were self-taught, please describe how you acquired these skills.
2. Have you ever worked at a haunted attraction? If yes, where and what was your position.
3. How would you best describe your style of work?
4. Can you duplicate a make-up look from pictures or other references?
5. Please rank your level of proficiency on a scale of 1 – 5 (5 Being expert, 1 Being inexperienced)  
Latex: \_\_\_\_\_ Gel 10: \_\_\_\_\_  
Prosthetics: \_\_\_\_\_ Brushwork: \_\_\_\_\_
6. Please attach 4 – 6 images of examples of your work (Trauma, creature, aging, etc.)

**Personal References:**

- 1.) Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ How Long: \_\_\_\_\_  
Address: \_\_\_\_\_
- 2.) Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ How Long: \_\_\_\_\_  
Address: \_\_\_\_\_
- 3.) Name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Relationship: \_\_\_\_\_ How Long: \_\_\_\_\_  
Address: \_\_\_\_\_

I CERTIFY that the above answers are true and complete to the best of my knowledge. I **authorize Mel's Funway Park (SpookyWorld presents Nightmare New England)** to investigate any statement contained in this application. I understand that this application is not intended to be any kind of contract or agreement. In the event of employment, I understand that any false or misleading information given in my application, correspondence, discussions or interview may result in immediate termination. I understand also, that I am required to abide by all rules, regulations and policies of **Mel's Funway Park (SpookyWorld presents Nightmare New England)**.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**For Spookyworld presents Nightmare New England Senior Management use only:**

Arrange Interview: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Date/Time: \_\_\_\_\_ Place: \_\_\_\_\_

Remarks: \_\_\_\_\_

Approved: \_\_\_\_ Yes: \_\_\_\_ No: \_\_\_\_ Date: \_\_\_\_ By: \_\_\_\_\_



## 2025 ~ Employment Application

**Please include a copy of your resume if you have one.**

Applications are considered without regard to race/color, religion, sex, national origin, age, marital or veteran status or the presence of non-job-related medical condition or handicap.

**Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Phone #:** \_\_\_\_\_

**E-mail Address:** \_\_\_\_\_

Our season includes the following

**September, 2025 – 19<sup>h</sup>, 20<sup>th</sup>, 21<sup>st</sup>, 26<sup>th</sup>, 27<sup>th</sup>**

**October, 2025 – 3<sup>rd</sup>, 4<sup>th</sup>, 5<sup>th</sup>, 10<sup>th</sup>, 11<sup>th</sup>, 12<sup>th</sup>, 13<sup>th</sup>, 16<sup>th</sup>, 17<sup>th</sup>, 18<sup>th</sup>, 19<sup>th</sup>, 23<sup>rd</sup>, 24<sup>th</sup>, 25<sup>th</sup>, 26<sup>th</sup>, 30<sup>th</sup>, 31<sup>st</sup>**

**November, 2025 – 1<sup>st</sup>**

**Desired Position:** \_\_\_\_\_

**Available Start Date:** \_\_\_\_\_

Have you ever been convicted or charged with a felony or misdemeanor?

Yes: \_\_\_\_\_ No: \_\_\_\_\_

If yes, please explain details in full including dates, offense(s) charged, jurisdiction and disposition of case:

Medical Conditions? \_\_\_\_\_

Emergency Contact? \_\_\_\_\_ Name: \_\_\_\_\_ Phone Number? \_\_\_\_\_

### **Special Skills:**

Describe any special skills or qualifications you may possess for this type of work. (Make-up artist, Scenic Construction, Actor, Artist, Designer, Theatrical and/or Film, Stagehand, Stage Management, etc.) If you have previous experience haunting, or you have a particular character you'd like to tell us about, please write it below. All costumes, props, and character ideas must be approved by senior management prior to use.

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